

Monthly Report of Operation Sequencing Batch Reactor Wastewater Treatment Plant

Name of Facility			Permit Num	ber	
Month	Year	Plant Desig	n Flow	Telephone	Number
			mgd		
Certified Operator: Nan	ne	Class	Certificate	Number	Expiration Date

Substitute for State Form 10829 (R/1-2003)

Page 1 of 4																		
						low	С	HEMICA USED	LS				RAW	SEWAG	Ε			
Day Of Month	Day of Week	Man-Hours at Plant (Plants less than 1 MGD only)	Air Temperature	Precipitation - Inches	Bypass At Plant Site ("x" If Occurred)	Collection System Overflow ("x" If Occurred)	Chlorine - Lbs	Lbs/Day or Gal./Day	Lbs/Day or Gal./Day	Total Flow - MG	Нq	CBOD5 - mg/l	CBOD5 - lbs	Susp. Solids - mg/l	Susp. Solids - Ibs	Phosphorus - mg/l	Ammonia - mg/l	
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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE	OF CERTIFIED	OPERATOR)	(DATE

(SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT)

(DATE)

Mont	Monthly Report of Operation																	
Sequ	ıencin	g Bato	h Rea	actor						(SIGN/	ATURE (OF CERT	IFIED OF	PERATO	R)		(DATE)	
Wast Name of F		er Trea	tment		For Month (Of:	Year											
										(SIGNAT	URE OF	PRINCIE	PAL EXEC	CUTIVE C	OFFICER		(DATE)	
Page	2 of 4			te for Sta		0829 (R/1				•	OR A	AUTHOR		ENT)				
		REACT	OR # 1			REACT	OR # 2		REACTOR # 3 FINAL EFFL							FLUEN	NT	
	30		/gm		30		/gm		30		/gm				Ē			
	% in	l/gr	Sludge Vol. Index - ml/gm	en -	Settleable Solids % in minutes	l/gr	Sludge Vol. Index - ml/gm	en -	Settleable Solids % in 30 minutes	l/gr	Sludge Vol. Index - ml/gm	en -	- əu	- eu	Coli - colony/100 ml		en -	l/bi
£	Solids 9	Susp. Solids - mg/l	nde	Dissolved Oxygen mg/l	olids	Susp. Solids - mg/l	opu	Dissolved Oxygen mg/l	olids	Susp. Solids - mg/l	nde	Dissolved Oxygen mg/l	hlori Ak	Residual Chlorine Final	ony,		Dissolved Oxygen mg/l	Phosphorus - mg/l
Mor	le Sc	olid	/ol. I) pe	le St	olid	/ol. I) pe	le Sc	olid	/ol. I) pe	al Cl	E C	· col) pe	orus
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Day Of Month	Settleable 9 minutes	Sus	Slud	Dissemg/I	Settl minu	Sus	pnIS	Disso mg/l	Settl minu	sns	Slud	Diss mg/l	Residual Chlorine Contact Tank	Res Fina	E. C	PH	Diss mg/l	Pho
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Comm	ents for	the Montl	h (major	repairs,	breakd	owns, pro	cess up	sets and	their ca	auses, inp	olant tre	atment p	rocess l	bypass,	etc.):			

Monthly Report of Operation
Sequencing Batch Reactor
Wastewater Treatment Plant

(SIGNATURE OF CERTIFIED OPERATOR)

(DATE)

Name of Facility Permit Number For Month Of: Year

(SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT)

(DATE)

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FINAL EFFLUENT																
	FI	ow		В	OD		Total Suspended Solids					Amn	Oth	Other		
		 		<u> </u>	- -											
Day Of Month	Effluent Flow - MG	Effluent Flow Weekly Average	CBOD5 - mg/l	CBOD5 - mg/l Weekly Average	CBOD5 - lbs	CBOD5 - Ibs/day Weekly Average	Susp. Solids - mg/l	Susp. Solids - mg/l Weekly Average	Susp. Solids - Ibs	Susp. Solids - Ibs/day Weekly Average	Ammonia - mg/l	Ammonia - mg/l Weekly Average	Ammonia - Ibs	Ammonia - Ibs/day Weekly Average		
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	Total Monthly Flow:			
	BOD5	(million gallons)		
Percent Removal				
				Percent Capacity
				(actual flow/design)

Monthly Report of Operation Sequencing Batch Reactor Wastewater Treatment Plant

(SIGNATURE OF CERTIFIED OPERATOR)

(Date)

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(SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT)

(Date)

Page 4			for State F	orm 1082	9 (R/1-200	3)	AUTHORIZED AGENT) DIGESTER OPERATION								
	SLUDG	E TO	_				DIG	ESTER (OPERAT	ION					
	DIGES	STER	Ana	erobic (Only	WI	l/gu	ing	ted	guin	ted	rawn			
Day Of Month		Waste Act. Sludge Gal. x 1000		Gas Production Cubic Ft. x 1000	Temperature - F	Supernatant Withdrawn hrs. or Gal. x 1000	Supernatant BOD5 mg/l or NH3-N mg/l	Total Solids in Incoming Sludge - %	Total Solids in Digested Sludge - %	Volatile Solids in Incoming Sludge - %	Volatile Solids in Digested Sludge - %	Digested Sludge Withdrawn hrs. or Gal. x 1000			
Эау С		<i>N</i> aste 3al. x	Нα	3as P Cubic	Гетр	Super hrs. o	Super or NF	Total Sludg	Total Sludg	Volatile Soli Sludge - %	Volatile Soli Sludge - %	Digest hrs. or			
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Year

Send completed forms by the 28th of the month to:
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF WATER QUALITY, DATA MANAGEMENT SECTION
P.O. BOX 6015

INDIANAPOLIS, INDIANA 46206-6015